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Una Una	der the Paperwork Reduction Act of 1995.	no persons are required to respond to a collection of infor	mation unless it displays a valid OMB control number.		
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) 2207/13919					
In re Application of Michael D. Haines					
		Application Number 10/024,724	Filed December 12, 2001		
		For METHOD AND APPARATUS FOR PROTECTING A DIE FROM ESD EVENTS (as amended)			
		Art Unit 2826 Examiner Alex	ander O. Williams		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):					
	One month (37 CFR 1.	.17(a)(1))	\$		
		\$ <u>420.00</u>			
	☐ Three months (37 CFR	\$			
	☐ Four months (37 CFR	\$			
	☐ Five months (37 CFR	1.17(a)(5))	\$		
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown					
above is reduced by one-half, and the resulting fee is: \$					
LJ A	check in the amount of the	tee is enclosed.			
□ P:	ayment by credit card. Form	PTO-2038 is attached.			
П Т	he Director has already beer	n authorized to charge fees in this appl	ication to a Deposit Account.		
The Director is hereby authorized to charge any fees which may be required,					
or credit any overpayment, to Deposit Account Number 11-0600. I have enclosed a duplicate copy of this sheet. I am the applicant/inventor.					
	have enclosed a duplicate of		MLO		
I am the			1110 GM (1119		
	_ •	of the entire interest. See 37 CFR 3.7			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 34,687					
attorney or agent under 37 CFR 1.34(a).					
Registration number if acting under 37 CFR 1.34(a)					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
•	August 2, 2004	_\$\hbigs_	um O' Dor		
	Date		Signature		
202-220-4255		·	Shawn W. O'Dowd		
	Telephone Number		Typed or printed name		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if					
	es of all the inventors or assignees on ignature is required, see below.	of record of the entire interest or their representative	ve(s) are required. Submit multiple forms if		